

**VIRGINIA BOARD OF MEDICINE
AD HOC COMMITTEE ON OFFICE-BASED ANESTHESIA**

MINUTES

JANUARY 23, 2003

The Ad Hoc Committee on Office-based Anesthesia chaired by Harry C. Beaver, MD met on Thursday, January 23, 2003, at 1:00 p.m., at the Department of Health Professions (“DHP”). A quorum was established.

MEMBERS PRESENT: Harry C. Beaver, MD, Chair
Patrick W. Clougherty, MD
David Dick, CRNA
Paul Rein, DO
Samuel H. Schustek, DPM
Daniel Pambianco, MD

MEMBERS ABSENT: John W. Zinsser, MD

STAFF PRESENT: William L. Harp, MD, Executive Director
Elaine Yeatts, DHP Senior Policy Analyst

PUBLIC COMMENT ON AGENDA ITEMS

The public in attendance was invited to participate throughout the meeting in the discussion of the issues related to regulations for office-based anesthesia.

AGENDA

Copies of public comment on the proposal for office-based anesthesia, a summary of the written and oral comment, and a copy of the proposed regulations were distributed.

After review of the comments, the committee recommended the following changes in the proposed regulations:

Add a #3 to 18 VAC 85-20-320(A) to read as follows: “Levels of sedation referred to in this chapter relate to the level of sedation intended by the practitioner. When the intent of the anesthesia is moderate sedation/conscious sedation, but the patient briefly moves to a state of deep sedation, the patient shall be considered moderately sedated/consciously sedated for purposes of compliance with this chapter.”

Amend 18 VAC 85-20-320(B) (6) to read as follows: Remain physically present or immediately available, as appropriate, for diagnosis, treatment and management of anesthesia-related

complications or emergencies to manage complications and emergencies until discharge criteria have been met;

Amend 18 VAC 85-20-330 (C) (1) to specify that practitioners have six months from the effective date of the regulation to be certified in advanced resuscitation techniques.

Amend 18 VAC 85-20-330 (C) (2) to clarify that the required four hours of continuing education be completed in topics related to anesthesia and that those hours are within the 60 hours required each biennium for licensure renewal and are subject to the random audit by the board.

Amend 18 VAC 85-20-360 (B) (5) to remove the requirement for a paper recorder on a continuous electrocardiograph.

The Committee discussed the comment pertaining to exclusion of clinics associated with and contiguous to hospitals from application of these regulations. In the interest of consistency and patient safety, the Committee's recommendation was to leave the definition of "office-based" as proposed.

Recommendations from the Ad Hoc Committee are to be discussed by the Legislative Committee on January 24, 2003 and then brought to the full Board for consideration in the adoption of final regulations on February 6, 2003.

ADJOURNMENT

With no further business to discuss, the Ad Hoc Committee on Office-based Anesthesia of the Board of Medicine adjourned.

Harry C. Beaver
Chair

William L. Harp, MD
Executive Director